

CENTER FOR DISEASE CONTROL
ABORTION SURVEILLANCE



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PREFACE

This report summarizes information received from collaborators in state health departments, hospitals, and other pertinent sources. It is intended primarily for their use, but may be of interest to others with responsibility for family planning evaluation and hospital abortion planning. Data shown in this report for the years 1969, 1970, 1971, and 1972 reflect the most current information available to the CDC, and updates data from previously published Abortion Surveillance Reports.

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I. SUMMARY

In 1972, 586,760 legal abortions were reported to the Center for Disease Control (CDC) from 27 states and the District of Columbia. The national abortion ratio (number of abortions per 1,000 live births) increased from 136.0 in 1971 to 180.1 in 1972. Of the abortions reported in 1972, 43.8% were performed in states outside the woman's state of residence, compared with 41.5% in 1971.

In 1972, approximately one-third of reported legal abortions were performed on women less than 20 years old. In 10 states, abortions outnumbered live births for women less than 15 years old. By race, 75.7% of women undergoing legal abortions were white; 22.6% were of black and other races. Estimates of race-specific national abortion ratios indicated that whites had 161 abortions per 1,000 live births compared with 225 for blacks. Approximately 70% of legal abortions were performed on women who were either single, widowed, separated, or divorced. For all states with available data, abortion ratios for unmarried women were higher than for currently married women. In 8 states, more unmarried pregnant women had legal abortions than had live births. Of the abortions reported, 84.1% were performed by curettage (suction or sharp); and 79.1% were performed in the first trimester of pregnancy.

A review of the data from states with information available for both 1971 and 1972 shows that (1) the percent of abortions to women less than 20 years old increased, and the median age for all women having abortions decreased from 23.0 to 22.7; (2) the percent of currently married women having abortions decreased from 33.1% to 30.8%; (3) the percent of abortions performed by suction or sharp curettage was essentially unchanged (84.5% to 84.6%); and (4) the percent of abortions performed in the first trimester also changed little--increasing from 78.2% to 78.6%.

In 1972, a total of 71 maternal deaths related to abortions were reported to CDC by the 50 states, New York City, and the District of Columbia; 19 of the 71 were associated with legally induced abortions. Using the 586,760 legally induced abortions reported to CDC in 1972 as the denominator, the overall death-to-case ratio was 3.2 deaths per 100,000 legally induced abortions.

The Special Studies Section of this report contains abstracts of 6 studies related to abortion procedures. The first study describes a cluster of complications resulting from a new method of second trimester abortion called "super coils"; the next 2 studies highlight the importance of proper Rh-immune globulin (RhIG) utilization following abortion and full-term delivery; the fourth study describes an overall death-to-case ratio of 6.5 per 100,000 legal abortions for New York State from mid-1970 to mid-1972; the fifth study describes 2 abortion deaths associated with paracervical block anesthesia; and the sixth study presents evidence which suggests that hemorrhage rates for patients undergoing saline abortion were decreased by elective removal of the placenta within the first hour after fetal delivery.

In 1972 important legislative changes and/or court decisions relating to abortion laws occurred in Connecticut, Kansas, New Jersey, and Vermont.

II. INTRODUCTION

The Center for Disease Control initiated surveillance of legal abortions in the United States in 1969. Since that time abortion laws, abortion reporting, and abortion ratios have changed dramatically (Table 1).* By the end of 1969, 9 states had

*See Preface

enacted laws which permitted abortion on grounds other than for the preservation of the life or health of the mother. Eight states reported abortion data to CDC, and partial data were available from 2 others. Over 22,000 abortions were reported in 1969, and the number of reported legal abortions per 1,000 live births (national abortion ratio) was 6.3. By the end of 1970 a total of 16 states had liberalized their abortion laws. In states where new laws had not been enacted, permissively interpreted statutes or court orders invalidating old laws resulted in significant increases in the number of reported legal abortions. In 1970 over 193,000 legal abortions were reported to CDC, and the national abortion ratio increased 8 times to 52.0 per 1,000 live births. No significant liberalizations of any state laws were enacted in 1971, and only 1 additional state began reporting to CDC. Yet, although the reporting basis remained relatively constant, the number of reported legal abortions increased to over 485,000 and the national abortion ratio increased nearly 3 times to 136.0. In 1972, 1 additional state liberalized its laws, bringing the total to 17. Two additional states began reporting to CDC, making at least partial data available from 28 states. These states reported over 586,000 legal abortions in 1972, and the reported national abortion ratio increased again but less markedly than in previous years, to 180.1 per 1,000 live births.

III. REPORTS FROM STATES

A. Legal Abortions by Place of Residence and Place of Occurrence

The legal abortion ratio for all areas reporting in 1972 increased to 315 abortions per 1,000 live births, compared with 132 in 1970 and 267 in 1971. The abortion ratio for reporting areas differs from the national abortion ratio of 180.1 since the former is based on abortions and live births in only the 28 reporting areas shown in Table 2. The increase from 1970 to 1971 in the abortion ratio for reporting areas was over 100%, while the increase from 1971 to 1972 was 18%. Between 1970 and 1971, all areas reporting from both years, except Oregon, experienced increases in the number of reported abortions, while the abortion ratios increased for all areas reporting for both years. Between 1971 and 1972 all areas continued to report increases in both the number of reported abortions and the abortion ratio except Arizona and Mississippi, which reported fewer abortions in 1972. While 80.7% of the total reported abortions were performed in New York and California in 1970 and 79.4% were performed in New York and California in 1971, 74.7% of all reported abortions were performed in these 2 states in 1972. The 2 areas having highest abortion ratios were the District of Columbia (1,801) and New York City (1,934); the 2 areas having the lowest abortion ratios were Tennessee (0.1) and Mississippi (1). In 1970 the District of Columbia, Hawaii, New York City, and upstate New York all had abortion ratios of 200 or more, and in 1971 California, Kansas, Washington, New Mexico, and Oregon were added to the list. In 1972, however, no additional states reported abortion ratios of 200 or more. Percentage changes in the number of abortions performed in 1972 over 1971 for those states which reported data for both years ranged from Mississippi's low of -34.4% to Vermont's high of 2,466.7% (Table 3). Five of the 6 states which reported data for 3 years or more--California, Colorado, Delaware, Georgia, and North Carolina--showed progressively smaller increases in the number of abortions performed each year. This pattern was reported less exactly by Oregon where there was a small decrease (-2.8%) from 1970 to 1971 and a small increase (2.1%) from 1971 to 1972.

An abortion ratio by state of occurrence* (Table 2) reflects the relative likelihood of a legal abortion occurring in a given state compared to a live birth occurring in that state. In 1972, residency information was known for 479,725 (81.8%) of all legal abortions. Of these, 210,345 (43.8%) were performed in states outside the

*Abortion ratio by state of occurrence is the number of abortions performed in the state per 1,000 live births occurring in that state. Abortion ratios by state of occurrence must be interpreted with great care, since the numerator contains abortions performed in a state regardless of the woman's state of residence.

woman's state of residence (Table 4). The percent of reported legal abortions performed in states outside the woman's state of residence was 29.8% in July-December 1970 and 41.5% in 1971. In 1972, 74.3% of the abortions reported on out-of-state residents were performed in New York State compared with 83.8% in 1971. Four areas reported more than 60% of their abortions on out-of-state residents: District of Columbia (74.5%), New Mexico (68.9%), Kansas (63.2%), and New York City (61.2%).

Of 210,345 out-of-state legal abortions reported, the exact state of residence for women having out-of-state abortions was known for 199,489. Table 5 shows the number and percent of residents of each state having abortions in state and out-of-state by geographic region. Figure 1 shows the corresponding abortion ratios by geographic region and by state of residence and is based on the 503,423 abortions where residence was known or could be assumed.* The portion of a state's abortion ratio accounted for by abortion performed in the state on residents of that state is represented in white, and the portion of a state's abortion ratio accounted for by residents of that state having abortions out-of-state is represented in black.

The abortion ratios for the 9 geographic regions of the country also varied greatly. There was a somewhat greater similarity of ratios between states within regions. The highest ratios were reported by the Pacific (318), Mid-Atlantic (284), and New England (192) regions. Most of the abortions to residents of New England and the Middle Atlantic states were performed in New York. Residents of the Pacific Coast states generally obtained abortions in their own state of residence. The lowest regional ratios were found for the East-South-Central (45) and the West-South-Central (60) states. Compared with 1971, all but 8 states showed increases in the abortion ratios for residents in 1972.

There was a wide disparity in the abortion ratios by state of residence among the 51 areas (Figure 1). The highest ratios were for New York (397) and Washington (378) while the lowest ratios were for Idaho (1) and South Dakota (11).

B. Legal Abortions By Age

Data on reported legal abortions by age group were available for 17 states (Table 6). Abortions performed on teen-agers (females under age 20) comprised almost one-third of all the abortions. The 20-24 year age group accounted for another one-third and the remaining one-third were abortions performed on women 25 years of age or older. Figure 2 shows the percent distribution of reported legal abortions by age group for states with data available for 1970, 1971, and 1972. The percent distribution did not change significantly over the 3 years, although there was a slight increase in the percentage of abortions performed on women 15-19 years old and a slight decrease in the percentage of abortions performed on women 20-24 years old. In each of the 17 states, women at the age extremes (less than 15 and 40 and over) had the highest abortion to live birth ratios (Table 7). Ten of the 17 states reported more abortions than live births to women less than 15 years old. In 1971, women in the age groups 15-19 and 40 and over had 1 abortion for every 2 live births. In 1972 women in these age groups had approximately 1.6 abortions for every 2 live births. Figure 3 shows age specific legal abortion ratios for 1970, 1971, and 1972 for all states with data available for all 3 years. Women less than 15 years old had the largest increases in abortion ratios both between 1970 and 1971 and between 1971 and 1972. For all other age groups, the increases between 1971 and 1972 were less than the increases between 1970 and 1971.

C. Legal Abortions By Race

The number and percent of legal abortions by race and by state of occurrence were available for 15 states (Table 8). The white category includes Caucasian, Mexican, Puerto Rican, and Cuban. The category black and other comprises Negro, American Indian, Chinese, Japanese, Hawaiian, part-Hawaiian, and "other".¹ Between

*Abortion ratio by state of residence is the number of abortions performed on residents of the state per 1,000 live births occurring in the state. The numerator includes abortions performed on residents of the state regardless of where the abortion was performed.

1971 and 1972 the percent of reported abortions (where race was known) performed on whites, decreased from 79.2% to 75.7%, while the percent performed on blacks and other races increased from 18.9% to 22.6%.

In 1972, 5 of 15 states reported an abortion ratio for whites greater than that for black and other races (Table 9). The overall abortion ratios by place of occurrence for whites (432) and black and other races (447) were approximately the same in 1972.

Estimates of race specific national abortion ratios in 1972 indicated that whites had 161 legal abortions per 1,000 live births while blacks had 225 legal abortions per 1,000 live births. This is in marked contrast to practices prior to the liberalization of abortion laws in this country in 1967. In a review of therapeutic abortions performed in New York City between 1951 and 1962, Gold et al., reported that of 4,703 reported abortions, 93% were performed on whites. "The white ratio was more than 5 times that of 'non-whites' and 26 times that of Puerto Ricans."² In another study, Tietze reported that from 1963 to 1965 in general hospitals participating in the Professional Activities Survey, 94% of 2,007 abortions were performed on whites, and the white ratio was twice as high as the black ratio.³

D. Legal Abortions By Marital Status

Seventeen states reported legal abortions by marital status (Table 10). The percentage of abortions performed on married women decreased from 33.6% in 1970 to 33.1% in 1971 to 30.8% in 1972 (Table 11). In 1972 the total abortion ratio for unmarried women was 18 times higher than that for married women (Table 12), while in 1971 it was 14 times higher for unmarried women. All states reporting had higher abortion ratios for unmarried women than for married women. In 1972, 8 of 17 states reported more legal abortions than live births to unmarried pregnant women. New York State, with a ratio of over 5,000 (5 legal abortions for every 1 live birth), continued to have the highest abortion ratio for unmarried women. The New York State ratio reflects the large number of unmarried women coming from other states to New York abortion facilities.

E. Legal Abortions By Number of Living Children

Thirteen states reported legal abortions by number of living children (Table 13). In each state and overall, more women were in the "no living children" category at the time of abortion than in any other category. Of the total number of women undergoing legal abortions in these 13 states, only a slightly greater number had 1 or more living children than had no living children. Table 14 shows that, among the 13 states which reported data by living children, abortion ratios were highest for women with no living children and women with 3 or more living children except for Mississippi, where the number of abortions performed was very small. Abortion ratios were lowest for women with 1 living child (Figure 4).

F. Legal Abortions By Type of Procedure

Abortion method data were available from 13 states and the District of Columbia (Table 15). The majority of pregnancies were terminated by suction curettage, followed in decreasing order by sharp dilatation and curettage, amniotic fluid replacement, hysterotomy-hysterectomy, and other. Of the total abortions performed where method was known, 88.6% were by curettage (suction or sharp). The states reporting the greatest proportion of abortions by curettage were Vermont (98.7%) and Washington (95.0%). In Washington, the state abortion law permitted abortion only during "the first 4 lunar months following conception." In the 6 states which reported abortions by type of procedure for each of the 3 years 1970-1972, the proportion of abortions performed by suction or sharp curettage increased from 75.5% in 1970 to 83.6% in 1971 to 85.7% in 1972. This rise was due to an increase in suction curettages from 40.6% to 76.6% over the 3 years (Figure 5). This trend of an increased proportion of total curettages with a rise in suction and a fall in sharp curettage was observed in 9 of 10 areas reporting data for at least 2 of the 3 years.

G. Legal Abortions By Length of Gestation

Table 16 shows duration of gestation for women undergoing abortions in 13 states and upstate New York. Table 17 shows related data from New York City. Overall, 79.1% of abortions were performed on women of less than 13 menstrual weeks gestation. Of the 13 states, the smallest proportion of first trimester abortions was performed in Colorado (49.9%) and the largest proportion was performed in Washington (94.9%).

For 6 states--Georgia, Hawaii, Maryland, New York, Oregon, and South Carolina--gestation data were available for 1970, 1971, and 1972 (Table 18). In 4 of the 6 states, the proportion of abortions performed in the first trimester increased over all 3 years; the exceptions were Georgia where the percentage of first trimester abortions declined from 75.0% in 1970 to 68.4% in 1972 and New York State where the percentage of first trimester abortions remained essentially unchanged between 1971 and 1972.

H. Legal Abortions With Stated Reasons Indicated

Twelve states reported the stated reasons for which abortions were performed (Table 19). In these states, excluding Alaska and Georgia, the proportion of women with mental health indications was 93.0%. In Alaska the abortion statute does not require a particular reason in order for a woman to obtain an abortion, and in Georgia a 1968 statute based on the American Law Institute Model Penal Code⁴ was modified by a 1970 Federal District Court ruling which declared that the legal indications for an abortion were unconstitutional.

IV. ABORTION-RELATED DEATHS

In 1972 CDC initiated a surveillance system to determine the number of abortion-related deaths occurring annually in the United States. Data were collected through the cooperation of personnel in charge of vital statistics in the state health departments. Reports were received from all 50 states, New York City, and the District of Columbia. A total of 71 maternal deaths related to abortion of all types was reported to CDC in 1972. Of these, 19 were associated with legally induced abortions, 35 were attributed to criminal abortions, and 15 were related to spontaneous abortions. In 2 cases, the type of abortion could not be ascertained. Using the 586,760 legal abortions reported to the CDC in 1972 as the denominator, the 19 legal abortion deaths yield a death-to-case ratio of 3.2 deaths per 100,000 legally induced abortions.

Of the 19 legally induced abortions which resulted in deaths, 9 (47.4%) were performed by suction or sharp curettage, 8 (42.1%) by amniotic fluid exchange, and 2 (10.5%) by hysterotomy. Based on these figures and an analysis of total abortions performed by each method, the death-to-case ratios for specific procedures were calculated. The death to case ratio for suction and sharp curettage combined was 1.7 deaths per 100,000 abortions while the ratio for procedures using amniotic fluid exchange was 13.2 deaths per 100,000 abortions. In some states hysterotomies and hysterectomies are reported as a single category. Because of this aggregation, it is not possible to calculate a precise death-to-case ratio for these procedures. A reasonable estimate, however, would be that the risk of death from hysterotomy is at least 5 times greater than that for amniotic fluid exchange.

V. REPORTS OF SPECIAL STUDIES

- A. Termination of pregnancy by "Super Coils": Morbidity Associated with a New Method of Second-Trimester Abortion. Berger GS, Bourne JP, Haber RJ, Tyler CW, Keith L, Knisely K, Zackler J: Amer J Obstet Gynec 116(3):297-304, June 1, 1973

On May 15, 1972, the Philadelphia Department of Health notified CDC of the hospitalization of an 18-year-old woman following an abortion induced by a new method called "super coils." This patient sustained a uterine laceration and a cervical perforation, requiring a total abdominal hysterectomy to control blood loss. She was 1 of

a group of 15 women in the second trimester of pregnancy who came to Philadelphia from other states to undergo induced abortions in an outpatient clinic. Following the procedures, the remaining 14 women returned to their home states.

According to the originator of the method, the super coil is a plastic strip 40 cm long which is wound into a spiral 2 cm in diameter. The coil is straightened and inserted in the uterus in a fashion similar to an intrauterine contraceptive device. As many coils as will fit the space are used, and they are removed approximately 12-24 hours after insertion; at this time evacuation of the uterine contents is said to usually occur. If the uterine contents are not expelled spontaneously, they are removed with ovum forceps. The originator states that the method is safe for use by paramedical personnel.

Of the 15 women who underwent super coil abortions, 13 received follow-up evaluation within 1 week of the initial procedures. Nine (60%) of the 15 women developed complications, and 3 (20%) of them sustained major complications.

The criteria for complications in this investigation were those defined in the Joint Program for the Study of Abortion (JPSA).⁵ Table 20 shows the complication rates of the patients who underwent abortion by the super coil compared with the complication rates for JPSA patients, on whom follow-up data were available, who were aborted by saline-amniotic fluid exchange, the technique most commonly employed in this country for terminating second trimester pregnancies. The complication rates, both major and total, for patients who underwent super coil abortions were higher than for patients who underwent abortions by saline-amniotic fluid exchange ($p < .05$). Until the super coil abortion technique is demonstrated to be safe in the hands of competent medical personnel and in a controlled research setting, the CDC findings suggest that it is not appropriate for use by paramedical personnel.

B. Rh-Immune Globulin Utilization

1. Rh-immune Globulin in Induced Abortion: Utilization in a High-Risk Population. Judelsohn RG, Berger GS, Wallace RB, Tiller MJ: Amer J Obstet Gynec 114(8):1031-1034, Dec 15, 1972

Among 1,731 women undergoing induced abortions in 5 urban hospitals, 236 had Rh-negative blood and no anti-Rh antibody prior to abortion. Nearly 75% of the Rh-negative patients were under 25 years of age, and 55.6% were nulliparous; approximately equal numbers of patients underwent abortions during the first and second trimesters. RhIG was not given to 31.8% of the unimmunized Rh negative patients. Studies indicate that 5% to 10% of unprotected patients undergoing induced abortions may become sensitized; failure to use RhIG could result in large numbers of infants affected by Rh hemolytic disease.^{6,7} The need for Rh prophylaxis to prevent such morbidity and death is underscored by the fact that women having abortions usually have an active child-bearing future.

2. Rh-Immune Globulin Utilization Following Term Delivery in 3 Rural Hospitals in Northeast Georgia. Campbell CC, Meyers JD, Brandling-Bennett AD: Immunization Branch, Center for Disease Control

Three hospitals located in non-metropolitan communities of northeast Georgia, which had purchased fewer units of RhIG in 1971 than their estimated requirements, were studied from May 1 through October 31, 1972. Funding was provided for blood typing and associated laboratory costs for every obstetrical admission as well as RhIG for any woman requiring it.

Overall, utilization of RhIG improved in the 3 hospitals during the period of study. Eighty-four percent (37) of the women who should have received RhIG actually did, compared with an estimate of 36% (27 of 75) of women in need who received RhIG in the 12 months preceding the study period.

The success of the program was felt to be due in large measure to the initiative taken by laboratory directors in learning of new admissions, arranging for blood typing, and in clarifying the need for RhIG with private physicians, many of whom were not obstetrician-gynecologists.

Cost remains a significant impediment to RhIG use. The 3 hospitals in the study charged an average of \$75 for typing and RhIG, which would amount to 1/3 of the charge for an uncomplicated delivery. Forty-five percent of the deliveries in these settings had no third party assistance for obstetrics costs.

C. Maternal Mortality Associated with Legal Abortions in New York State: July 1, 1970-June 30, 1972. Berger GS, Tietze C, Pakter J, Katz SH: Obstet Gynec 43(3):315-326, March 1974

In the 2-year period July 1, 1970-June 30, 1972, 446,052 legal abortions were reported in New York State. Twenty-five deaths associated with legal abortions performed in this 2-year period were reported to the Departments of Health of New York City and New York State, and the CDC. In addition, a mail survey of obstetrician-gynecologists throughout the United States discovered 4 previously unreported deaths. Based on the total of 29 deaths, the overall case-fatality ratio was 6.5 per 100,000. There was no significant difference between the fatality ratios for New York residents and non-residents. The risk of death was 7 times higher for women who underwent abortion at 13 weeks gestation or more than for those who had abortions at 12 weeks or less. Compared with suction or sharp curettage, saline-amniotic fluid exchange was associated with a 7 to 9 times greater risk of mortality and hysterotomy with a risk of mortality 100 times greater.

D. Maternal Mortality Associated with Paracervical Block Anesthesia. Berger GS, Tyler CW: Center for Disease Control; Herrod EK: County of Erie, Department of Health, Buffalo, New York.

This report describes 2 maternal deaths believed to have resulted from toxic reactions to lidocaine hydrochloride administered for paracervical block anesthesia for suction curettage abortion.

One case, a 29-year old woman at 7 menstrual weeks gestation, experienced seizures, respiratory arrest, and death following injection of an undetermined amount (either 200 or 400 mg) of epinephrine-free lidocaine hydrochloride. At autopsy there was an estimated 150 ml of blood in the ligamentous tissue adjacent to the cervix in the lower uterine segment without evidence of uterine perforation.

The other case was a 17-year old woman at 12 weeks gestation who also died of respiratory arrest following grand mal seizures which occurred within minutes of an injection of 20 ml (400 mg) of 2% epinephrine-free lidocaine hydrochloride. Prior to the injection, the barrel of the syringe had been withdrawn to determine if the needle had entered a blood vessel and blood was not aspirated. A post-mortem examination revealed no anatomical cause of death.

Toxic reactions to local anesthesia are rare. The Joint Program for the Study of Abortion (JPSA) reported a rate of 3.5 convulsions per 10,000 curettage procedures in which local anesthesia was used.⁸ Toxic reactions may arise from excessive dosage or inadvertent entry of a blood vessel.

According to the Food and Drug Administration (FDA) approved package insert, the total dose of Xylocaine (lidocaine) without epinephrine, should be less than 300 mg and not over 4.5 mg/kg (2 mg/lb) of body weight. It is important to note that this dose is less than that recommended for lidocaine with epinephrine. The recommended dose may well have been exceeded in both cases.

Intra-vascular injection may occur even when blood is not obtained on aspiration prior to injection.⁹ This is a possible, though unproved, factor in the second case. The risk of mortality might be reduced by adopting a technique in which anesthesia is infiltrated just beneath the mucosa.¹⁰

E. Management of Retained Placenta Associated with Saline Abortion. Berger GS, Tyler CW, Center for Disease Control; Kerenyi T, Park East Hospital, New York City

Retained placenta is one of the most common complications of saline-amniotic fluid exchange. A controversy exists as to whether early removal of retained placenta decreases or increases the incidence of post-abortual hemorrhage or infection. In hopes of gathering objective evidence concerning this problem, data were collected on

2,170 saline abortions,* performed by 30 physicians between July 1 and December 31, 1972, at Park East Hospital. The physicians managed cases according to their own judgment without suggestions from the study staff.

The overall complication rate was 13.8 per 100 cases. Hemorrhage accounted for over half of all complications. Risk of hemorrhage increased with age, number of previous pregnancies, and number of previous induced abortions. Each of these factors was an independent determinant of risk. Hemorrhage rates were lowest (2.7%) in the 485 patients in whom expulsion of the placenta immediately followed delivery of the fetus.

For 1,733 (82%) patients, elective removal of the placenta was not done. Among these patients the hemorrhage rate was 5.8% when the placental delivery occurred at from 1 to 60 minutes after delivery of the fetus, and increased to 16.2% when over 60 minutes had elapsed. The overall hemorrhage rate in the group with no elective removal of the placenta was 8.4% (Table 21).

Among the 374 (18%) patients in whom elective removal of the placenta was done, hemorrhage occurred in 7.2% when removal was in the first 60 minutes and in 3.0% at over 60 minutes. The overall hemorrhage rate for this group was 3.7%

The 2 groups were comparable in terms of previously mentioned factors associated with risk of hemorrhage, namely age, parity, and previous abortions. The group in which elective removal was not performed included cases in which "indicated" removal was done because of hemorrhage or fever. The requirement for blood transfusion was identical in both groups of patients (0.6%).

Fever rates in patients with and without elective removal of the placenta were the same through the first 2 hours of retention (2.2%). At 3 hours or later, elective removal carried a slightly higher risk of fever (5% vs 2%).

The data support the contention that removal of the placenta within the first hour decreases the likelihood of post-abortion hemorrhage. There is now justification for a study in which patients are randomly assigned to an early elective removal group or to a group in which management is left up to the individual physician.

VI. LEGAL NOTES

Table 22 shows the distribution of major categories of state abortion laws as of January 1, 1973. It is intended to serve as an aid in interpreting the abortion data covered by this report and is not intended to imply definitive legal research on the part of the Family Planning Evaluation Division of CDC.

Of the 28 states (including the District of Columbia) reporting legal abortions to CDC in 1972, 4 (Arizona, Connecticut, Nebraska, and Tennessee) had laws permitting abortion only to save the woman's life; 1 (Mississippi) included rape as an indication; 2 (Massachusetts and Pennsylvania) prohibited "unlawful abortion"; 3 (Alabama, District of Columbia, and Vermont) included threats to maternal life or health as indications; 10 (Arkansas, Colorado, Delaware, Florida, Kansas, Maryland, New Mexico, North Carolina, South Carolina, and Virginia) operated under the American Law Institute Model Abortion Law; 1 (Oregon) had a law based on 1968 recommendations of the American College of Obstetricians and Gynecologists; 4 (Alaska, Hawaii, New York, and Washington) had no legal restriction on reasons for abortion prior to fetal viability; and 3 (California, Georgia, and Wisconsin) had legal restrictions on reasons for abortion invalidated by court decisions.

*Sixty cases in which complications occurred prior to the delivery of the fetus and 3 cases in which the interval from delivery of the fetus to delivery of the placenta was unknown were excluded from further analysis.

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Table 1

CHRONOLOGICAL RECORD OF THE STATUS OF ABORTION LAW CHANGES,
 ABORTION REPORTING, AND ABORTION RATIOS IN THE UNITED STATES
 1969-1972

	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Cumulative No. of States with Reform Abortion Laws Enacted Since 1967	9	16	16	17
No. of States from which State-wide Abortion Data are Reported*	8	17	18	20
Additional States from which Abortion Data are Reported from Individual Hospitals or Facilities	2	7	7	8
Total No. of States from which Partial or Complete Abortion Data are Reported*	10	24	25	28
Total No. of Abortions Reported to CDC	22,670	193,491	485,816	586,760
National Abortion Ratio (Abortions per 1,000 Live Births)	6.3	52.0	136.0	180.1

*Beginning 1970 includes District of Columbia.

Table 2

REPORTED LEGAL ABORTION RATIOS
BY PLACE OF OCCURRENCE
SELECTED STATES,* 1972

<u>State</u>	<u>Abortions</u> ¹	<u>Live Births</u> ¹	<u>Abortions/1,000 Live Births</u>
Alabama	1,156 ²	61,765	19
Alaska	1,172	6,948	169
Arizona	275 ²	37,258 ³	7
Arkansas	793	32,985 ³	24
California	138,584	329,826	420
Colorado	5,260	38,585	136
Connecticut	2,579 ²	39,130 ³	66
Delaware	1,342	8,867 ³	151
Dist. of Columbia	38,868	21,579 ³	1,801
Florida ⁴	3,378	81,276 ³	42
Georgia	2,509	87,366	29
Hawaii	4,547	15,413	295
Kansas	12,248	33,176	369
Maryland	9,093	51,059 ³	178
Massachusetts ⁵	3,394	82,192 ³	41
Mississippi	61	45,907	1
Nebraska	789 ²	23,473	34
New Mexico	5,989 ²	20,589 ³	291
New York	299,891	253,439	1,183
(City)	(223,373) ⁶	(115,498) ³	(1,934)
(Upstate)	(76,518)	(137,941)	(555)
North Carolina	8,365	88,894	94
Oregon	7,143	31,308	228
Pennsylvania	8,540 ²	164,742 ³	52
South Carolina	854	48,873	17
Tennessee	9 ²	65,799	**
Vermont	231	7,257	32
Virginia	4,496	75,068	60
Washington	17,767	47,148 ³	377
Wisconsin	7,427 ²	64,142 ³	116
Total	586,760	1,864,064	315

1. Data from state health departments unless otherwise noted.
2. Reported from 1 or more hospitals in state.
3. Live birth data from Monthly Vital Statistics Report Provisional Statistics, Vol.21, No.12, March 1, 1973, No.9, November 27, 1972, No.3, May 24, 1972, and Vol.20, Nos. 10-12, 1971-72.
4. April-December 1972.
5. October 1971-September 1972.
6. Estimated by New York City Health Department; July 1973 report.

* All states with data available.

** Ratio less than 1.

Table 3

PERCENT INCREASE* IN ABORTIONS
FOR EACH FULL YEAR OF REPORTING
SELECTED STATES** 1969-1972

<u>State</u>	<u>YEAR</u>			
	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Alaska				2.4
Arkansas				24.5
California	205.7	326.2	78.6	18.7
Colorado	100.8	158.1	61.5	26.2
Delaware			101.6	18.9
Dist. of Col.				105.7
Georgia		319.6	124.0	58.9
Hawaii				10.0
Kansas				29.3
Maryland				9.5
Mississippi				-34.4
New York				11.7
N. Carolina	108.9	344.9	222.6	91.1
Oregon		411.4	-2.8	2.1
S. Carolina				17.5
Vermont				2,466.7
Virginia				18.6
Washington				23.8

*Percent increase over previous year.

**All states with data available.

Table 4

REPORTED LEGAL ABORTIONS PERFORMED
ON OUT-OF-STATE RESIDENTS
SELECTED STATES,* 1972

State	Total Abortions Performed	No. of Abortions With Residence Known ¹	No. Abortions On Out-of-State Residents	Percent of Abortions With Known Residence Performed on Out-of-State Residents
Alabama	1,156	1,156	4	0.3
Alaska	1,172	1,171	14	1.2
California	138,584	126,356	20,201	16.0
Colorado	5,260	5,260	405	7.7
Connecticut	2,579	2,579	3	0.1
Delaware	1,342	1,342	63	4.7
Dist. of Col.	38,868	28,308	21,101	74.5
Georgia	2,509	2,509	0	0.0
Hawaii	4,547	4,547	25	0.5
Kansas	12,248	12,248	7,736	63.2
Maryland	9,093	9,093	186	2.0
Mississippi	61	61	0	0.0
New Mexico	5,989	5,989	4,127	68.9
New York	258,285	257,208	156,255	60.8
(City) ²	(181,767)	(180,796)	(110,633)	(61.2)
(Upstate)	(76,518)	(76,412)	(45,622)	(59.7)
N. Carolina	8,365	8,324	53	0.6
Oregon	7,143	7,143	14	0.2
S. Carolina	854	853	5	0.6
Tennessee	9	9	0	0.0
Vermont	231	231	38	16.5
Virginia	4,496	4,484	4	0.1
Wisconsin ³	7,427	854	111	13.0
Total	510,218	479,725	210,345	43.8

1. Number with residence known refers to in-state or out-of-state residence status.
Residence information for New Mexico is estimated.

2. Numbers are from certificates filed January - December, 1972.

3. Of the 6 hospitals reporting data, 2 did not identify residence status.

*All states reporting residency; data for Alabama, Connecticut, New Mexico, Tennessee, and Wisconsin are from hospitals.

Table 5

REPORTED LEGAL ABORTIONS WITH STATE OF RESIDENCE KNOWN--1972

<u>States by Region</u>	<u>Abortions Performed In State of Residence</u>		<u>Abortions Performed Outside State of Residence</u>		<u>Total</u>
	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	
NEW ENGLAND	(6,163)	(19.3)	(25,845)	(80.7)	(32,008)
Maine	0	0.0	1,690	100.0	1,690
New Hampshire	0	0.0	1,483	100.0	1,483
Vermont	193	18.3	859	81.7	1,052
Massachusetts	3,394 ^{1,2}	19.3	14,187	80.7	17,581
Rhode Island	0	0.0	1,869	100.0	1,869
Connecticut	2,576 ^{3,4}	30.9	5,757	69.1	8,333
MIDDLE ATLANTIC	(109,111)	(74.6)	(37,108)	(25.4)	(146,219)
New York	100,571	100.0	44	0.0	100,615
New Jersey	0	0.0	22,832	100.0	22,832
Pennsylvania	8,540 ^{1,3}	37.5	14,232	62.5	22,772
EAST NORTH CENTRAL	(743)	(1.4)	(53,211)	(98.6)	(53,954)
Ohio	0	0.0	16,666	100.0	16,666
Indiana	0	0.0	5,481	100.0	5,481
Illinois	0	0.0	14,091	100.0	14,091
Michigan	0	0.0	14,626	100.0	14,626
Wisconsin	743 ³	24.0	2,347	76.0	3,090
WEST NORTH CENTRAL	(5,301)	(28.7)	(13,139)	(71.3)	(18,440)
Minnesota	0	0.0	2,227	100.0	2,227
Iowa	0	0.0	2,356	100.0	2,356
Missouri	0	0.0	6,953	100.0	6,953
North Dakota	0	0.0	148	100.0	148
South Dakota	0	0.0	116	100.0	116
Nebraska	789 ¹	43.9	1,008	56.1	1,797
Kansas	4,512	93.2	331	6.8	4,843
SOUTH ATLANTIC	(36,879)	(52.2)	(33,833)	(47.8)	(70,712)
Delaware	1,279	58.3	914	41.7	2,193
Maryland	8,907	59.7	6,022	40.3	14,929
Dist. of Columbia	7,207	98.0	145	2.0	7,352
Virginia	4,480	40.0	6,707	60.0	11,187
West Virginia	0	0.0	1,491	100.0	1,491
North Carolina	8,271	70.0	3,539	30.0	11,810
South Carolina	848	27.7	2,208	72.3	3,056
Georgia	2,509	35.5	4,561	64.5	7,070
Florida	3,378 ^{1,5}	29.1	8,246	70.9	11,624

Table 5 (Continued)

<u>States by Region</u>	<u>Abortions Performed In State of Residence</u>		<u>Abortions Performed Outside State of Residence</u>		<u>Total</u>
	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	
EAST SOUTH CENTRAL	(1,222)	(11.8)	(9,168)	(88.2)	(10,390)
Kentucky	0	0.0	3,132	100.0	3,132
Tennessee	9	0.2	4,279	99.8	4,288
Alabama	1,152 ³	54.9	948	45.1	2,100
Mississippi	61	7.0	809	93.0	870
WEST SOUTH CENTRAL	(793)	(3.7)	(20,837)	(96.3)	(21,630)
Arkansas	793 ¹	51.0	762	49.0	1,555
Louisiana	0	0.0	1,210	100.0	1,210
Oklahoma	0	0.0	2,843	100.0	2,843
Texas	0	0.0	16,022	100.0	16,022
MOUNTAIN	(6,992)	(53.5)	(6,084)	(46.5)	(13,076)
Montana	0	0.0	172	100.0	172
Idaho	0	0.0	20	100.0	20
Wyoming	0	0.0	269	100.0	269
Colorado	4,855	89.4	573	10.6	5,428
New Mexico	1,862 ^{3,4}	94.9	100	5.1	1,962
Arizona	275 ^{1,3}	9.6	2,590	90.4	2,865
Utah	0	0.0	730	100.0	730
Nevada	0	0.0	1,630	100.0	1,630
PACIFIC	(136,730)	(99.8)	(264)	(0.2)	(136,994)
Washington	17,767 ¹	99.8	42	0.2	17,809
Oregon	7,129	99.3	49	0.7	7,178
California	106,155	99.9	152	0.1	106,307
Alaska	1,157	99.2	9	0.8	1,166
Hawaii	4,522	99.7	12	0.3	4,534
TOTAL	303,934	60.4	199,489	39.6	503,423

1. Residency information not available; all abortions reported are assumed to have been performed on residents of the state.
2. October 1971-September 1972.
3. Reported from one or more hospitals in state.
4. Estimated.
5. April-December.

Table 6

REPORTED LEGAL INDUCED ABORTIONS BY AGE AND PLACE OF OCCURRENCE, SELECTED STATES,* 1972

State	<15		15-19		20-24		25-29		30-34		35-39		≥ 40		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Alaska	23	2.0	389	33.2	335	28.6	187	16.0	151	12.9	62	5.3	18	1.5	7	0.6	1,172	100.0
Arkansas	21	2.6	294	37.1	217	27.4	106	13.4	85	10.7	51	6.4	19	2.4	0	0.0	793	100.0
California	1,998	1.4	45,358	32.7	44,010	31.8	24,165	17.4	13,014	9.4	7,275	5.2	2,688	1.9	76	0.1	138,584	100.0
Colorado	81	1.5	1,820	34.6	1,720	32.7	780	14.8	448	8.5	265	5.0	128	2.4	18	0.3	5,260	100.0
Delaware	115 ¹	8.6	466 ²	34.7	270 ³	20.1	202	15.1	145	10.8	107	8.0	37	2.8	0	0.0	1,342	100.0
Georgia	124	4.9	749	29.9	705	28.1	428	17.1	288	11.5	152	6.1	63	2.5	0	0.0	2,509	100.0
Hawaii	32	0.7	1,144	25.2	1,515	33.3	833	18.3	525	11.5	336	7.4	157	3.5	5	0.1	4,547	100.0
Kansas	241	2.0	4,570	37.3	3,717	30.3	1,653	13.5	1,016	8.3	722	5.9	327	2.7	2	0.0	12,248	100.0
Maryland	260	2.9	3,039	33.4	2,553	28.1	1,491	16.4	955	10.5	560	6.2	235	2.6	0	0.0	9,093	100.0
Mississippi	1	1.6	22	36.1	12	19.7	12	19.7	4	6.6	6	9.8	4	6.6	0	0.0	61	100.0
New York	3,434	1.1	85,833	28.6	97,105	32.4	50,402	16.8	29,505	9.8	17,101	5.7	7,244	2.4	9,267	3.1	299,891	100.0
(City) ⁴	(2,571)	(1.2)	(61,026)	(27.3)	(72,457)	(32.4)	(38,618)	(17.3)	(22,114)	(9.9)	(12,412)	(5.6)	(5,052)	(2.3)	(9,123)	(4.1)	(223,373)	(100.0)
(Upstate)	(863)	(1.1)	(24,807)	(32.4)	(24,648)	(32.2)	(11,784)	(15.4)	(7,391)	(9.7)	(4,689)	(6.1)	(2,192)	(2.9)	(144)	(0.2)	(76,518)	(100.0)
N. Carolina	220	2.6	2,832	33.9	2,312	27.6	1,277	15.3	850	10.2	539	6.4	243	2.9	92	1.1	8,365	100.0
Oregon	172	2.4	2,506	35.7	2,303	32.2	1,090	15.3	597	8.4	328	4.6	142	2.0	5	0.1	7,143	100.0
S. Carolina	34	4.0	199	23.3	233	27.3	149	17.4	98	11.5	85	10.0	38	4.4	18	2.1	854	100.0
Vermont	1	0.4	74	32.0	76	32.9	41	17.7	19	8.2	16	6.9	4	1.7	0	0.0	231	100.0
Virginia	182	4.0	1,458	32.4	1,210	26.9	659	14.7	492	10.9	356	7.9	133	3.0	6	0.1	4,496	100.0
Washington	214	1.2	6,598	37.1	5,747	32.3	2,594	14.6	1,399	7.9	878	4.9	327	1.8	10	0.1	17,767	100.0
Total	7,153	1.4	157,351	30.6	164,040	31.9	86,069	16.7	49,591	9.6	28,839	5.6	11,807	2.3	9,506	1.8	514,356	100.0

1. <16.

2. 16-20.

3. 21-24.

4. Numbers in each category based on age distribution of 1972 certificates applied to 1972 total abortions estimated by New York City Health Department.

*All states with data available.

Table 7

AGE-SPECIFIC LEGAL ABORTION RATIOS,¹
SELECTED STATES,* 1972

<u>State</u>	<u><15</u>	<u>15-19</u>	<u>20-24</u>	<u>25-29</u>	<u>30-34</u>	<u>35-39</u>	<u>≥40</u>	<u>Total</u>
Alaska	2,091	359	125	94	193	192	250	169
Arkansas ³	116	37	17	15	28	37	46	24
California	2,664	844	352	263	330	494	658	420
Colorado ³	1,397	272	111	74	110	195	346	136
Delaware ²	2,054	293	82	83	149	261	339	151
Georgia	191	34	22	20	34	49	82	29
Hawaii	1,143	535	279	173	253	453	863	295
Kansas	3,051	716	289	182	314	599	945	369
Maryland ³	1,275	330	139	102	160	262	447	178
Mississippi	2	2	1	1	1	3	6	1
New York	5,512	2,623	1,106	635	846	1,272	2,097	1,183
(City) ³	(7,675)	(4,012)	(1,768)	(1,115)	(1,369)	(1,902)	(3,124)	(1,934)
(Upstate)	(2,997)	(1,417)	(527)	(264)	(395)	(678)	(1,193)	(555)
N. Carolina	497	128	71	60	100	170	278	94
Oregon	3,308	453	186	119	196	357	597	228
S. Carolina ³	118	18	12	14	21	45	73	17
Vermont	100	62	27	19	24	59	54	32
Virginia	545	97	46	32	57	112	168	60
Washington ³	3,242	877	298	193	292	535	730	377
Total	1,689	720	369	261	360	555	849	428

1. Calculated as the number of legal abortions for women of a given age group per 1,000 live births to women of the same age group. Sources of data are Table 6 of this report for abortions by age; live births by age of mother are from State Health Departments unless otherwise noted.
2. Source of live birth data is Table 2 for total 1972 live births; live birth distribution by age of mother is from National Center for Health Statistics. 1969 distribution applied to 1972 births.
3. Source of live birth data is Table 2 for total 1972 live births; live birth distribution by age of mother is 1971 distribution.

*All states with data available.

Table 8

REPORTED LEGAL ABORTIONS, BY RACE AND
PLACE OF OCCURRENCE, SELECTED STATES,* 1972

State	White		Black & Other		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%
Alaska	899	76.7	271	23.1	2	0.2	1,172	100.0
Arkansas	713	89.9	80	10.1	0	0.0	793	100.0
California	104,686	75.5	26,913	19.4	6,985	5.0	138,584	100.0
Colorado	4,001	76.1	501	9.5	758	14.4	5,260	100.0
Delaware	835	62.2	507	37.8	0	0.0	1,342	100.0
Georgia	1,244	49.6	1,263	50.3	2	0.1	2,509	100.0
Hawaii	1,781	39.2	2,743	60.3	23	0.5	4,547	100.0
Kansas	10,613	86.7	1,432	11.7	203	1.7	12,248	100.0
Maryland	4,532	49.8	4,419	48.6	142	1.6	9,093	100.0
Mississippi	47	77.0	14	23.0	0	0.0	61	100.0
New York	232,591	77.6	67,300	22.4	0	0.0	299,891	100.0
(City) ¹	(164,156)	(73.5)	(59,217)	(26.5)	(0)	(0.0)	(223,373)	(100.0)
(Upstate)	(68,435)	(89.4)	(8,083)	(10.6)	(0)	(0.0)	(76,518)	(100.0)
N. Carolina	5,618	67.2	2,729	32.6	18	0.2	8,365	100.0
S. Carolina	553	64.8	297	34.8	4	0.5	854	100.0
Vermont	216	93.5	2	0.9	13	5.6	231	100.0
Virginia	2,315	51.5	2,181	48.5	0	0.0	4,496	100.0
Total	370,644	75.7	110,652	22.6	8,150	1.7	489,446	100.0

1. Numbers in each category based on racial distribution from 1972 certificates filed, applied to 1972 annual abortions estimated by New York City Health Department.

*All states with data available.

Table 9

LEGAL ABORTION RATIOS¹, BY RACE
SELECTED STATES,* 1972

<u>State</u>	<u>White Ratio</u>	<u>Black & Other Ratio</u>	<u>White/Black & Other Ratio</u>
Alaska	175	151	1.2
Arkansas ²	29	10	2.9
California	390	599	0.7
Colorado	129	252	0.5
Delaware ²	119	273	0.4
Georgia	22	42	0.5
Hawaii	324	279	1.2
Kansas	356	518	0.7
Maryland ²	120	351	0.3
Mississippi	2	1	2.0
New York	1,137	1,377	0.8
(City) ²	(2,080)	(1,619)	(1.3)
(Upstate)	(545)	(657)	(0.8)
N. Carolina	91	100	0.9
S. Carolina ²	18	16	1.1
Vermont	32	39	0.8
Virginia	40	124	0.3
Total	432	447	1.0

1. Ratio calculated as the number of race-specific abortions per 1,000 race-specific live births. Table 8 is source for number of abortions by race; "unknown" race for each state distributed according to known racial distribution of that state. Race-specific live births are from state health departments unless otherwise noted.
2. Source of live birth data is Table 2 for total 1972 births. Live births by race for Arkansas, Maryland, New York City, and South Carolina based on 1971 distribution applied to total 1972 births; live births by race for Delaware is 1969 distribution applied to total 1972 births.

*All states with data available.

Table 10

REPORTED LEGAL ABORTIONS, BY MARITAL STATUS
AND STATE OF OCCURRENCE, SELECTED STATES,* 1972

State	Married		Unmarried ¹		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%
Alaska	408	34.8	744	63.5	20	1.7	1,172	100.0
Arkansas	256	32.3	537	67.7	0	0.0	793	100.0
California	36,221	26.1	98,490	71.1	3,873	2.8	138,584	100.0
Colorado ²	1,108	21.1	3,051	58.0	1,101	20.9	5,260	100.0
Delaware	394	29.4	948	70.6	0	0.0	1,342	100.0
Georgia	841	33.5	1,571	62.6	97	3.9	2,509	100.0
Hawaii ²	1,707	37.5	2,840	62.5	0	0.0	4,547	100.0
Kansas	3,086	25.2	9,161	74.8	1	0.0	12,248	100.0
Maryland	2,670	29.4	6,365	70.0	58	0.6	9,093	100.0
Mississippi ²	34	55.7	27	44.3	0	0.0	61	100.0
New York	93,315	31.1	206,576	68.9	0	0.0	299,891	100.0
(City) ³	(62,356)	(27.9)	(161,017)	(72.1)	(0)	(0.0)	(223,373)	(100.0)
(Upstate) ⁴	(30,959)	(40.5)	(45,559)	(59.5)	(0)	(0.0)	(76,518)	(100.0)
N. Carolina	2,895	34.6	5,456	65.2	14	0.2	8,365	100.0
Oregon	1,695	23.7	5,448	76.3	0	0.0	7,143	100.0
S. Carolina	344	40.3	505	59.1	5	0.6	854	100.0
Vermont	69	29.9	160	69.3	2	0.9	231	100.0
Virginia ²	1,530	34.0	2,966	66.0	0	0.0	4,496	100.0
Washington	4,721	26.6	13,013	73.2	33	0.2	17,767	100.0
Total	151,294	29.4	357,858	69.6	5,204	1.0	514,356	100.0

1. Unmarried includes women who are widowed, separated, divorced, and women who have never married.
2. Legitimate and illegitimate.
3. Numbers are based on distribution of data from certificates filed in 1972 and total abortions for 1972 as estimated by the New York City Health Department.
4. When no information was given for the father as required on the certificate, it was inferred that the woman was unmarried.

*All states with data available.

Table 11

PERCENTAGE OF TOTAL ABORTIONS ON MARRIED WOMEN
BY STATE OF OCCURRENCE, 1970-1972*

<u>State</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Alaska	38.5 ¹	33.7	34.8
Arkansas	---	31.1	32.3
Delaware	30.2	33.4	29.4
Georgia	43.7	36.2	33.5
Hawaii	36.8 ^{2,3}	37.3 ³	37.5 ³
Kansas	---	27.7	25.2
Maryland	31.6 ⁴	30.9	29.4
New York	---	33.6	31.1
(City)	---	(31.2) ⁶	(27.9) ⁷
(Upstate)	(37.2) ⁴	(42.4)	(40.5)
N. Carolina	---	39.1	34.6
Oregon	23.0	24.2	23.7
S. Carolina	37.2 ⁵	39.8	40.3
Virginia	---	36.4 ³	34.0 ³
Washington	---	28.9	26.6
Overall Percent Married	33.6	33.1	30.8
Percent married for the 8 states with data for 1970, 1971, and 1972	33.6	38.9	37.8

1. July 29 - December 31.

2. March 11 - December 31.

3. Stated as legitimate rather than married.

4. July - December.

5. February - December.

6. Data from certificates filed; July - December.

7. Data from certificates filed; 1972.

*All states with data available for at least 2 of the 3 years.

Table 12

ESTIMATED LEGAL ABORTION RATIOS BY MARITAL STATUS,¹
SELECTED STATES,* 1972

<u>State</u>	<u>Married</u>	<u>Unmarried</u> ²
Alaska ³	65	1,337
Arkansas	9	121
California ⁴	122	4,080
Colorado	40	1,054
Delaware ³	52	737
Georgia ⁵	12	140
Hawaii	121	2,084
Kansas	101	3,397
Maryland	62	827
Mississippi ³	1	3
New York ⁴	431	5,583
(City) ⁴	(687)	(6,514)
(Upstate) ⁴	(246)	(3,709)
North Carolina ⁵	38	436
Oregon ⁵	59	2,135
South Carolina	8	67
Vermont	11	272
Virginia	23	324
Washington	110	3,241
Total	144	2,579

1. Calculated as legal abortions to women of a given marital status per 1,000 live births to women in that marital status. Table 10 is source for number of abortions by marital status. "Unknown" marital status for each state distributed according to known marital status distribution of that state. Live births to married women are legitimate births; live births to unmarried women are assumed to be registered as illegitimate births. Legitimacy distribution of live births based on state's 1971 distribution unless otherwise noted.
2. Unmarried includes women who are widowed, separated, divorced, and women who have never married.
3. Live births by legitimacy status are based on 1969 distribution applied to 1972 births.
4. Live births by legitimacy status are based on 1970 distribution applied to 1972 births.
5. Live births by legitimacy status are 1972 data from State Health Department.

*All states with data available.

Table 13

REPORTED LEGAL ABORTIONS BY NUMBER OF LIVING CHILDREN
AND STATE OF OCCURRENCE, SELECTED STATES*, 1972

State	0		1		2		3		4		≥5		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Alaska	611	52.1	166	14.2	174	14.8	95	8.1	45	3.8	45	3.8	36	3.1	1,172	100.0
California ¹	53,805	38.8	31,364	22.6	19,714	14.2	13,022	9.4	7,845	5.7	9,600	6.9	3,234	2.3	138,584	100.0
Colorado	2,386	45.4	541	10.3	540	10.3	293	5.6	141	2.7	124	2.4	1,235	23.5	5,260	100.0
Delaware ²	566	42.2	267	19.9	226	16.8	152	11.3	61	4.5	70	5.2	0	0.0	1,342	100.0
Georgia	1,013	40.4	496	19.8	414	16.5	292	11.6	155	6.2	138	5.5	1	0.0	2,509	100.0
Kansas	7,419	60.6	1,514	12.4	1,463	11.9	919	7.5	517	4.2	416	3.4	0	0.0	12,248	100.0
Maryland	3,943	43.4	1,838	20.2	1,568	17.2	879	9.7	433	4.8	432	4.8	0	0.0	9,093	100.0
Mississippi	25	41.0	7	11.5	11	18.0	4	6.6	4	6.6	10	16.4	0	0.0	61	100.0
New York	146,669	48.9	43,782	14.6	33,555	11.2	22,450	7.5	12,659	4.2	12,706	4.2	28,070	9.4	299,891	100.0
(City) ³	(116,055)	(52.0)	(38,387)	(17.2)	(28,011)	(12.5)	(18,641)	(8.3)	(10,593)	(4.7)	(10,898)	(4.9)	(788)	(0.4)	(223,373)	(100.0)
(Upstate) ²	(30,614)	(40.0)	(5,395)	(7.1)	(5,544)	(7.2)	(3,809)	(5.0)	(2,066)	(2.7)	(1,808)	(2.4)	(27,282)	(35.7)	(76,518)	(100.0)
N. Carolina	3,946	47.2	1,273	15.2	1,217	14.5	724	8.7	313	3.7	348	4.2	544	6.5	8,365	100.0
S. Carolina	350	41.0	137	16.0	142	16.6	102	11.9	54	6.3	68	8.0	1	0.1	854	100.0
Vermont	150	64.9	16	6.9	19	8.2	14	6.1	11	4.8	10	4.3	11	4.8	231	100.0
Virginia	1,774	39.5	671	14.9	687	15.3	459	10.2	214	4.8	222	4.9	469	10.4	4,496	100.0
Total	222,657	46.0	82,072	17.0	59,730	12.3	39,405	8.1	22,452	4.6	24,189	5.0	33,601	6.9	484,106	100.0

1. Number of previous pregnancies.

2. Number of prior viable births.

3. Number in each category based on pregnancy order distribution of 1972 certificates applied to 1972 total abortions estimated by New York City Health Department.

*All states with data available.

Table 14

ABORTION TO LIVE BIRTH RATIO¹ BY NUMBER OF
PREVIOUS LIVE BIRTHS, SELECTED STATES,* 1972

<u>State</u>	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>≥4</u>
Alaska	216	82	196	222	165
California	403	333	421	575	701
Colorado	202	67	118	126	102
Delaware	163	108	173	196	164
Georgia ²	27	20	34	49	42
Kansas	569	159	296	370	294
Maryland	190	123	205	232	219
Mississippi	2	1	2	1	1
New York	1,616	630	975	1,318	1,387
(City)	(2,362)	(1,169)	(1,731)	(2,347)	(2,388)
(Upstate)	(911)	(202)	(402)	(552)	(554)
N. Carolina	115	56	100	118	85
S. Carolina	18	11	20	26	23
Vermont	54	8	20	29	42
Virginia	60	34	76	110	102
Total	552	281	408	539	534

1. Calculated as legal abortions in 1972 to women with X number of living children divided by the number of women having live births in 1972 with X number of previous live births. Table 13 is source for number of abortions by number of living children. Distribution of live births for 1972 are from State Health Departments with the following exceptions: Maryland and New York City total live births in 1972 were distributed according to live birth order in 1971 from States' Vital Statistics Reports; for Colorado, Delaware, Mississippi, North Carolina, and South Carolina total live births in 1972 were distributed according to live birth order in 1969, the most recent year available from the National Center for Health Statistics.
2. Live births of unknown birth order were redistributed according to known birth order distribution.

*All states with data available.

Table 15

REPORTED LEGAL ABORTIONS BY TYPE OF PROCEDURE AND STATE OF OCCURRENCE
SELECTED STATES,* 1972

State	Sharp D&C		Suction Curettage		Amniotic Fluid Replacement		Hysterotomy		Hysterectomy		Other		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Alaska	309	26.4	728	62.1	103	8.8	5	0.4	13	1.1	3	0.3	11	0.9	1,172	100.0
California	82,632	59.6	33,988	24.5	11,977	8.6	- ¹	-	- ¹	-	- ¹	-	9,987 ¹	7.2	138,584	100.0
Dist. of Col.	2,740	7.0	24,369	62.7	1,654	4.3	85	0.2	7	0.0	- ²	-	10,013	25.8	38,868	100.0
Georgia	11	0.4	1,768	70.5	687	27.4	5	0.2	32	1.3	2	0.1	4	0.2	2,509	100.0
Hawaii	309	6.8	1,760	38.7	156	3.4	6	0.1	9	0.2	3	0.1	2,304	50.7	4,547	100.0
Kansas	2,402	19.6	9,116	74.4	546	4.5	26	0.2	153	1.2	5	0.0	0	0.0	12,248	100.0
Maryland	274	3.0	6,001	66.0	2,039	22.4	312	3.4	251	2.8	216	2.4	0	0.0	9,093	100.0
Massachusetts ³	1,644	48.4	857	25.3	619	18.2	+	+	192 ⁴	5.7	- ²	-	82	2.4	3,394	100.0
New York (City) ⁵	27,817 (23,936)	9.3 (10.7)	231,423 (172,827)	77.2 (77.4)	32,779 (24,461)	10.9 (11.0)	763 (526)	0.3 (0.2)	153 (79)	0.1 (0.0)	1,597 (1,544)	0.5 (0.7)	5,359 (0)	1.8 (0.0)	299,891 (223,373)	100.0 (100.0)
(Upstate)	(3,881)	(5.1)	(58,596)	(76.6)	(8,318)	(10.9)	(237)	(0.3)	(74)	(0.1)	(53)	(0.1)	(5,359)	(7.0)	(76,518)	(100.0)
N. Carolina	1,500	17.9	4,696	56.1	1,326	15.9	229	2.7	288	3.4	305	3.6	21	0.3	8,365	100.0
Oregon	754	10.6	5,223	73.1	968	13.6	26	0.4	154	2.2	18	0.3	0	0.0	7,143	100.0
S. Carolina	120	14.1	531	62.2	35	4.1	9	1.1	126	14.8	30	3.5	3	0.4	854	100.0
Vermont	5	2.2	223	96.5	1	0.4	0	0.0	0	0.0	2	0.9	0	0.0	231	100.0
Washington	487	2.7	16,368	92.1	632	3.6	73	0.4	0	0.0	180	1.0	27	0.2	17,767	100.0
Total	121,004	22.2	337,051	61.9	53,522	9.8	+	+	2,917 ⁴	0.5	2,361	0.4	27,811	5.1	544,666	100.0

1. Included in the unknown category are 9,229 abortions which were performed by hysterotomy, hysterectomy, or a combination of any of the first 3 methods.
2. Abortions not reported for this category.
3. October 1971-September 1972.
4. Hysterotomy and hysterectomy
5. Numbers in each category based on data from 1972 certificates applied to 1972 total abortions estimated by New York City Health Department.

*All states with data available.

Table 16

REPORTED LEGAL INDUCED ABORTIONS, BY MENSTRUAL WEEK OF GESTATION
AND STATE OF OCCURRENCE, SELECTED STATES,* 1972

State	≤8		9-10		11-12		13-15		16-20		21+		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%								
Alaska	305	26.0	355	30.3	227	19.4	127	10.8	101	8.6	16	1.4	41	3.5	1,172	100.0
Arkansas ¹	384	48.4	236	29.8	90	11.3	33	4.2	48	6.1	2	0.3	0	0.0	793	100.0
California	43,584	31.4	41,877	30.2	25,421	18.3	12,280	8.9	9,675	7.0	1,248	0.9	4,499	3.2	138,584	100.0
Colorado ²	562	10.7	1,042	19.8	1,020	19.4	824	15.7	846	16.1	146	2.8	820	15.6	5,260	100.0
Hawaii	1,651	36.3	1,391	30.6	739	16.3	388	8.5	255	5.6	54	1.2	69	1.5	4,547	100.0
Kansas ¹	4,213	34.4	4,169	34.0	2,522	20.6	821	6.7	477	3.9	38	0.3	8	0.1	12,248	100.0
Maryland ^{2,3}	1,997	22.0	2,420	26.6	1,755	19.3	775	8.5	2,022	22.2	124	1.4	0	0.0	9,093	100.0
Mississippi	15	24.6	16	26.2	13	21.3	4	6.6	7	11.5	3	4.9	3	4.9	61	100.0
New York																
Upstate	24,866	32.5	23,262	30.4	13,070	17.1	5,584	7.3	5,937	7.8	1,560	2.0	2,239	2.9	76,518	100.0
N. Carolina	2,171	26.0	2,047	24.5	1,524	18.2	1,003	12.0	1,100	13.2	168	2.0	352	4.2	8,365	100.0
Oregon	2,683	37.6	2,008	28.1	1,116	15.6	376	5.3	900	12.6	56	0.8	4	0.1	7,143	100.0
S. Carolina	293	34.3	252	29.5	145	17.0	83	9.7	25	2.9	8	0.9	48	5.6	854	100.0
Virginia ^{1,4}	1,363	30.3	955	21.2	469	10.4	442	9.8	1,093	24.3	70	1.6	104	2.3	4,496	100.0
Washington ¹	10,691	60.2	5,497	30.9	669	3.8	582	3.3	249	1.4	7	0.0	72	0.4	17,767	100.0
Total	94,778	33.0	85,527	29.8	48,780	17.0	23,322	8.1	22,735	7.9	3,500	1.2	8,259	2.9	286,901	100.0

1. Length of gestation is physician's estimate.

2. Numbers in each category are adjusted to add to annual total.

3. Length of gestation is fetal age.

4. Gestation of 15-16 weeks reported as one category. Single weeks (15 and 16) estimated and added to appropriate category for comparability.

*All States with comparable data available. New York City data provided in Table 17.

Table 17

REPORTED LEGAL ABORTIONS, BY MENSTRUAL WEEK OF GESTATION,
NEW YORK CITY, 1972

<u>≤ 12</u>		<u>13-15</u>		<u>16-20</u>		<u>21+</u>		<u>Unknown</u>		<u>Total</u>	
<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
141,548	77.9	10,930	6.0	14,166	7.8	4,423	2.4	10,700	5.9	181,767	100.0

Source: Certificates of Termination.

Table 18

PERCENT OF REPORTED LEGAL ABORTIONS LESS THAN 13 MENSTRUAL WEEKS
OF GESTATION, SELECTED STATES,* 1970-1972

<u>State</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
	<u>Percent</u>	<u>Percent</u>	<u>Percent</u>
Alaska		74.1	75.7
Arkansas		82.6	89.5
Colorado		46.0	49.9
Georgia	75.0	74.7	68.4
Hawaii	79.4 ¹	81.3	83.2
Kansas		88.6	89.0
Maryland	58.5 ²	65.8	67.9
New York	77.0 ²	78.9	78.5
(City)	(78.4) ^{2,3}	(78.6) ³	(77.9) ³
(Upstate)	(72.0) ²	(80.3)	(80.0)
N. Carolina		63.3	68.6
Oregon	65.5	74.3	81.3
S. Carolina	46.4 ⁴	69.1	80.8
Virginia		64.0	62.0
Washington		85.0	94.9
Overall Percent Less Than 13 Weeks Gestation	75.6	78.2	78.6
Percent Less Than 13 Weeks For The Six States With Data For 1970, 1971, and 1972	75.6	78.4	78.2

1. March 11 - December 31.
2. July - December.
3. Data from certificates filed.
4. February - December.

*All states with data available for at least 2 of the 3 years.

Table 19

INDICATION FOR ABORTION BY STATE OF OCCURRENCE
SELECTED STATES,* 1972

State	Mental Health		Physical Health		Risk of Fetal Deformity		Rape or Incest		Other		Unknown		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Alaska	11	0.9	57	4.9	1	0.1	9	0.8	1,067	91.0	27	2.3	1,172	100.0
Arkansas	603	76.0	158 ¹	19.9	29	3.7	3	0.4	0	0.0	0	0.0	793	100.0
Colorado	4,774	90.8	129	2.5	10	0.2	49	0.9	0	0.0	298	5.7	5,260	100.0
Delaware	1,321	98.4	12	0.9	8	0.6	0	0.0	1	0.1	0	0.0	1,342	100.0
Georgia	220	8.8	55	2.2	24	1.0	8	0.3	2,199	87.6	3	0.1	2,509	100.0
Kansas	11,075	90.4	171	1.4	119	1.0	882	7.2	1	0.0	0	0.0	12,248	100.0
Maryland	8,794	96.7	211	2.3	20	0.2	22	0.2	46	0.5	0	0.0	9,093	100.0
Mississippi	30	49.2	17	27.9	0	0.0	1	1.6	3	4.9	10	16.4	61	100.0
N.Carolina	7,725 ²	92.3	576	6.9	26	0.3	29	0.3	0	0.0	9	0.1	8,365	100.0
Oregon ³	6,997	95.7	216	3.0	61	0.8	29	0.4	6	0.1	0	0.0	7,309	100.0
S.Carolina	725	84.9	86	10.1	17	2.0	8	0.9	12	1.4	6	0.7	854	100.0
Virginia	4,297	95.6	104	2.3	28	0.6	5	0.1	62 ⁴	1.4	- ⁴	-	4,496	100.0
Total	46,572	87.0	1,792	3.3	343	0.6	1,045	2.0	3,397	6.3	353	0.7	53,502	100.0

1. Includes 17 with both physical and mental indications.

2. Socioeconomic and maternal mental health are combined into 1 category.

3. More than 1 indication was reported for approximately 2% of the state's 7,143 women undergoing legal abortions.

4. Other and unknown reported as 1 category.

* All states with data available.

Table 20

COMPLICATION RATES IN PATIENTS WHO UNDERWENT SECOND TRIMESTER ABORTIONS
INDUCED BY SUPER COILS VERSUS SALINE-AMNIOTIC FLUID EXCHANGE

<u>Method</u>	<u>Number of Patients</u>	<u>Complication Rate per 100</u>	
		<u>Major</u>	<u>Total</u>
Super Coil*	15	20.0	60.0
Saline-Amniotic Fluid Exchange	5,973	2.6	27.9

*Assumes no complications following discharge from clinic for 2 women for whom complete follow-up data were not available.

Source: Center for Disease Control: Morbidity and Mortality Weekly Rep. (22) 18: 159-160, 1973, May 5.

Table 21

INCIDENCE OF HEMORRHAGE OCCURRING AFTER DELIVERY OF THE
FETUS ASSOCIATED WITH SALINE-AMNIOTIC FLUID EXCHANGE,
PARK EAST HOSPITAL, NEW YORK CITY, JULY - DECEMBER, 1972

<u>Interval from Delivery of Fetus to Delivery of Placenta (Minutes)</u>	<u>Elective Removal of Placenta Not Performed* (N=1,733) Hemorrhage Rate per 100</u>	<u>Elective Removal of Placenta Performed (N=374) Hemorrhage Rate per 100</u>
0	2.7 (13/485)	Not applicable
1-60 ¹	5.8 (39/669)	7.2 (5/69)
61+ ²	16.2 (94/579)	3.0** (9/305)
Total ²	8.4 (146/1,733)	3.7** (14/374)

1. $\chi^2 = .224$ P > .50

2. $\chi^2 = 47.34$ P < .001

*Spontaneous delivery or indicated removal of placenta.

**These rates are falaciously lowered by removal from the "elective" group of women who hemorrhaged and then had "indicated" removal.

Table 22
MAJOR CATEGORIES OF ABORTION LAW
UNITED STATES – JANUARY 1, 1973

MAJOR CATEGORIES OF STATE ABORTION LAWS	STATES HAVING SIMILAR ABORTION LAWS
I. Abortion allowed only when necessary to preserve the life of the pregnant woman	Arizona, Connecticut, ¹ Idaho, Illinois ² , Indiana, Iowa ³ , Kentucky, Louisiana ⁴ , Maine, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Hampshire, North Dakota, Ohio, Oklahoma, Rhode Island, South Dakota, Tennessee, Utah, West Virginia, Wyoming
II. Indications for legal abortion include threats to the pregnant woman's life and forcible rape	Mississippi
III. "Unlawful" or "unjustifiable" abortions are prohibited	Massachusetts ⁵ , New Jersey ⁶ , Pennsylvania
IV. Abortions allowed when continuation of the pregnancy threatens the woman's life or health	Alabama, District of Columbia, Vermont ⁷
V. American Law Institute Model Abortion Law; "A licensed physician is justified in terminating a pregnancy if he believes that there is substantial risk that continuance of the pregnancy would gravely impair the physical or mental health of the mother or that the child would be born with grave physical or mental defect, or that the pregnancy resulted from rape, incest or other felonious intercourse"	Arkansas, Colorado, Delaware, Florida, Kansas ⁸ , Maryland (does not include incest), New Mexico, North Carolina, South Carolina, Virginia
VI. Abortion law based on the May 1968 recommendations of the American College of Obstetricians and Gynecologists. Allows abortion when the pregnancy resulted from felonious intercourse, and when there is risk that continuance of the pregnancy would impair the physical or mental health of the mother. "In determining whether or not there is substantial risk (to the woman's physical or mental health), account may be taken of the mothers's total environment, actual or reasonably foreseeable"	Oregon
VII. No legal restrictions on reasons for which an abortion may be obtained prior to viability of the fetus.	Alaska, Hawaii, New York, Washington
VIII. Legal restrictions on reasons for which an abortion may be obtained were invalidated by court decision.	California, Georgia, Texas, Wisconsin

1. In *Abele v. Markle*, 342 F Supp 800 (D. Conn. 1972), a U. S. District Court struck down the Connecticut law as an unconstitutional violation of privacy. Five weeks later a new law was enacted which was similar to the first, except that it contained a preamble declaring the intent of the legislature to protect human life from the moment of conception. This law was also struck down by a decision of the same U. S. District Court, 351 F Supp 224 (D. Conn. 1972). That order was stayed, however, by the United States Supreme Court, 93 S.Ct. 212 (1972) thus restoring the Connecticut law until the Supreme Court could rule.

2. A federal District Court decision, *Doe v. Scott*, 321 F Supp. 1385 (N.D. Ill., Jan. 29, 1971), holding the Illinois Abortion Statute unconstitutional has been stayed pending appeal in the United States Supreme Court.

3. In *State v. Dunkleberger*, the Iowa statute which is couched in terms of saving the life of the woman, has been interpreted to suggest that preservation of health is sufficient. 221 N.W. 592 (Iowa, 1928).

4. Although the Louisiana Abortion Statute does not contain an express exception to the "crime of abortion," the Louisiana Medical Practice Act authorizes the Medical Board to suspend or institute court proceedings to revoke a doctor's certificate to practice medicine in the state when the doctor has procured or aided or abetted in the procuring of an abortion "unless done for the relief of a woman whose life appears imperiled after due consultation with another licensed physician." La. Rev. State Ann. 37:1261.

5. The statutory terms have been interpreted to permit abortion to save the woman's life or to prevent serious impairment of physical or mental health. (*Com. v. Wheeler*, 53 N.E. 2d 4 (Mass. 1944).

6. On February 29, 1972, a U.S. District Court ruled in the case of *Young Women's Christian Association of Princeton, N.J. v. Kugler*, 342 F Supp 1048 (D.N.J. 1972) that the New Jersey Statute was in violation of the First, Ninth, and Fourteenth Amendments. However, the state appealed the ruling, and the U.S. Court of Appeals for the Third Circuit has ruled that the District Court Decision applies only to the physicians who brought the original suit. (Per Curiam, June 14, 1972).

7. On January 14 and February 8, 1972, the Vermont Supreme Court in the case of *Beecham v. Leahy*, 287 A 2d 836(1972) ruled that the Vermont law which prohibited abortion except to save the life of the mother, was discriminatory in that it denied abortion where threats to health, short of threat to life, were involved. The Vermont Attorney General then issued guidelines in which he stated his opinion that the law had been broadened to permit abortion within the first trimester in case of threat to a woman's physical or mental health.

8. A U.S. District Court in Kansas ruled unconstitutional those provisions of the state abortion law requiring that hospitals performing abortion be accredited by the Joint Commission on Accreditation of Hospitals and that abortion be approved by 3 physicians. (*Poe v. Menghini* 39 F Supp. 986 (D. Kan. 1972).

FIGURE 1 RATIOS OF REPORTED LEGAL ABORTIONS TO LIVE BIRTHS, BY STATE OF RESIDENCE, JANUARY-DECEMBER 1972

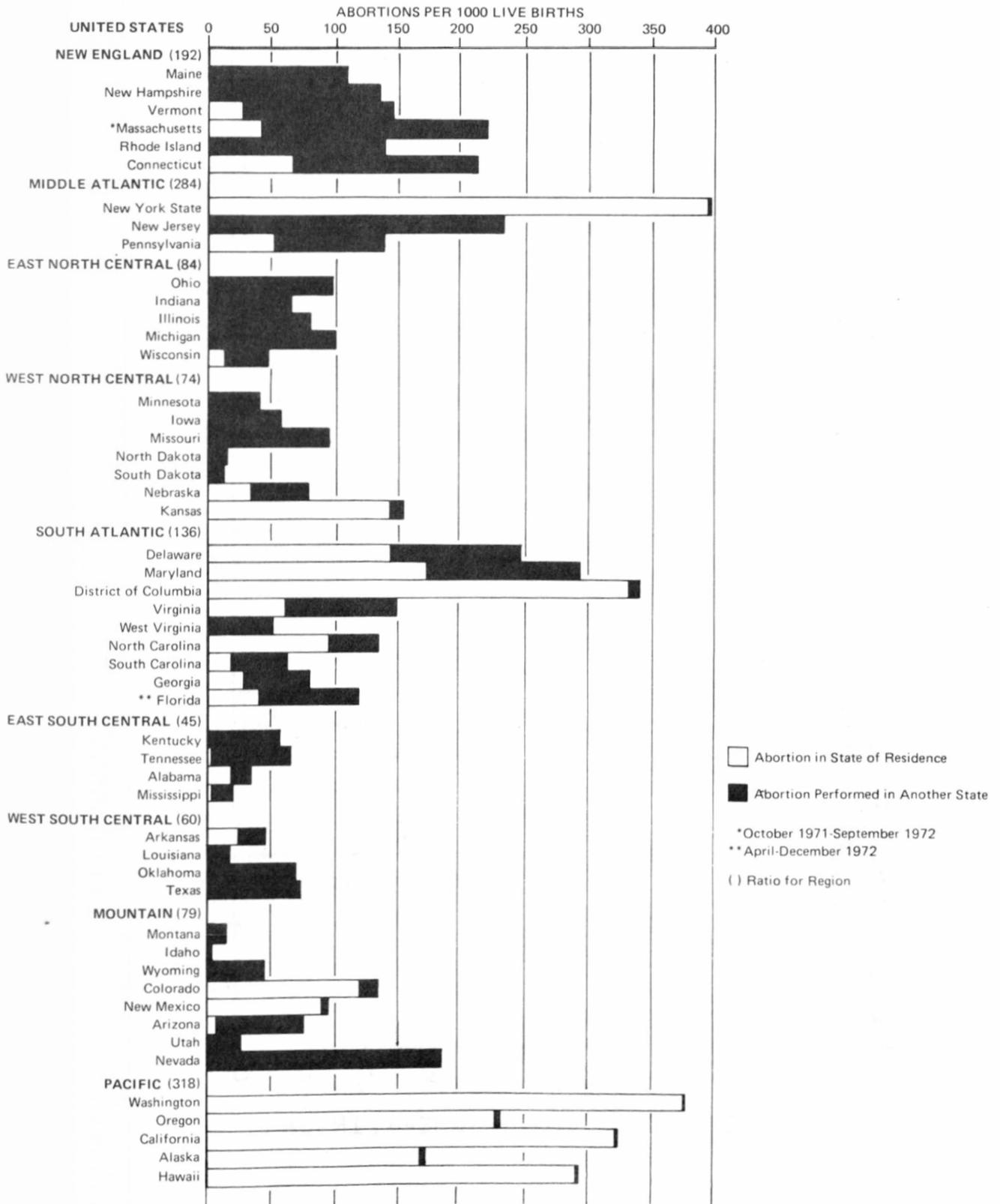
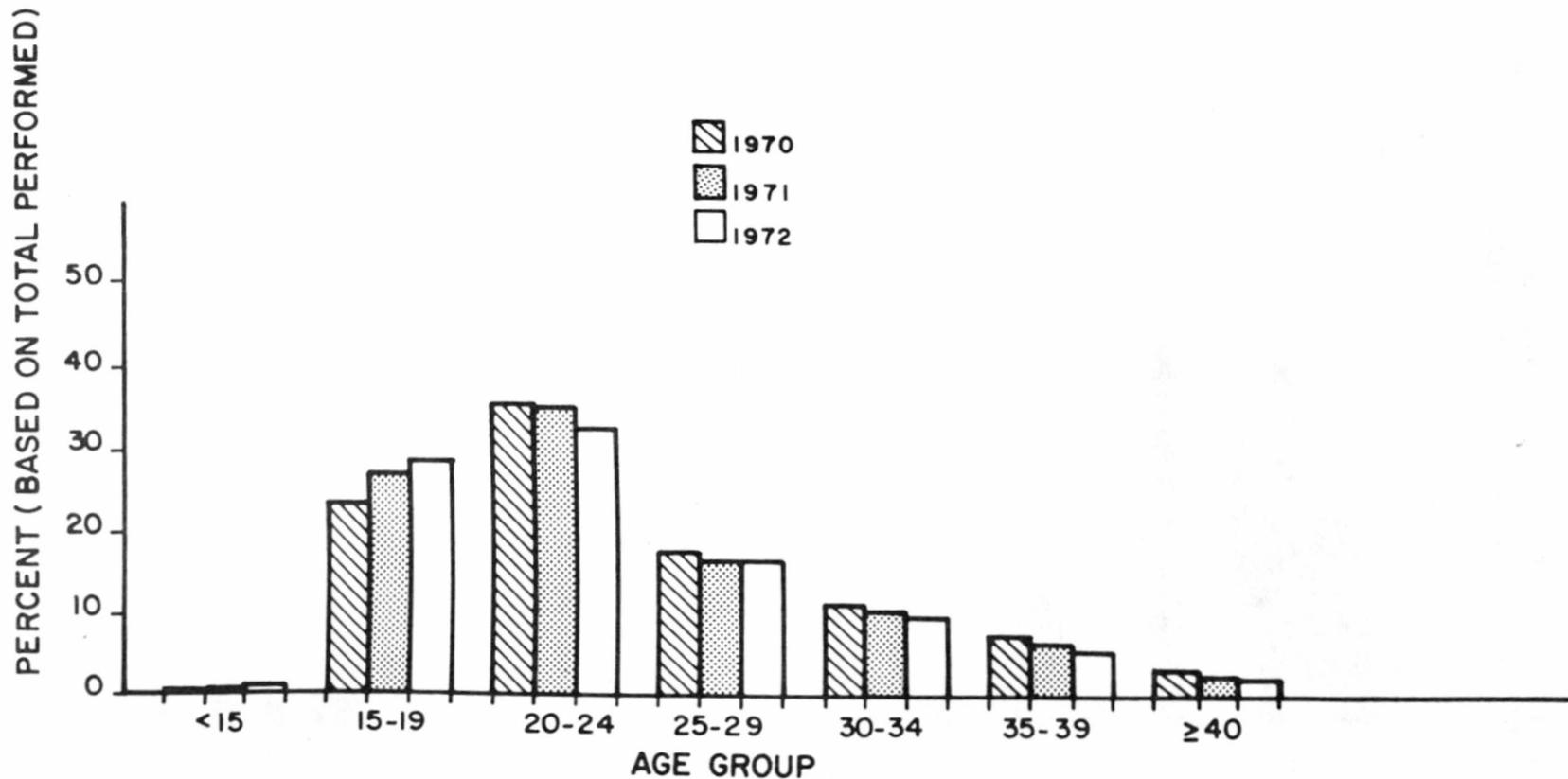
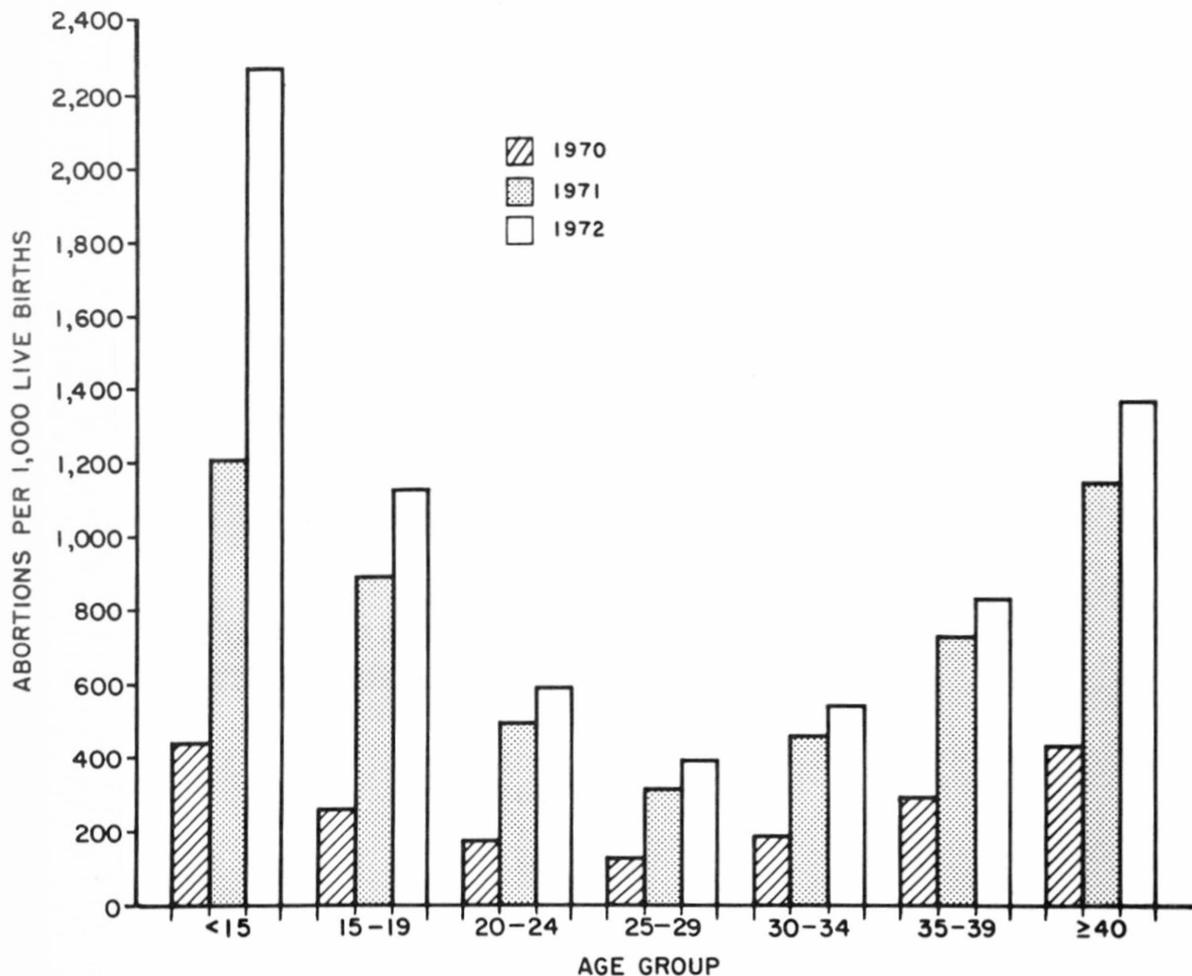


Fig. 2 PERCENT DISTRIBUTION OF REPORTED LEGAL ABORTIONS, BY AGE GROUP, SELECTED STATES* 1970-1972



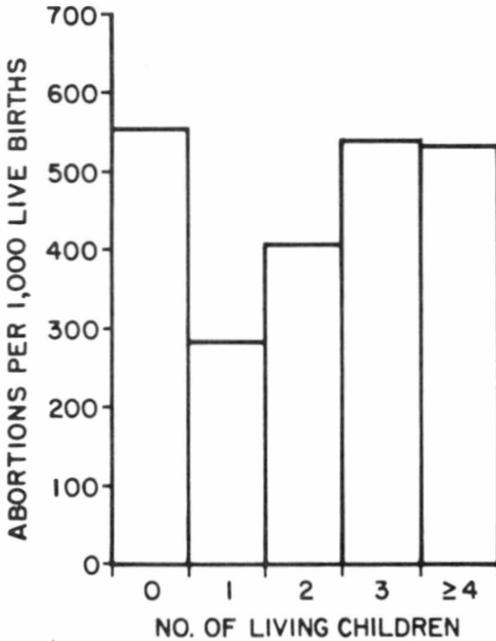
*ALASKA, COLORADO, DELAWARE, GEORGIA, HAWAII, NEW YORK, OREGON, SOUTH CAROLINA

Fig. 3 AGE - SPECIFIC LEGAL ABORTION RATIOS, SELECTED STATES*, 1970 - 1972



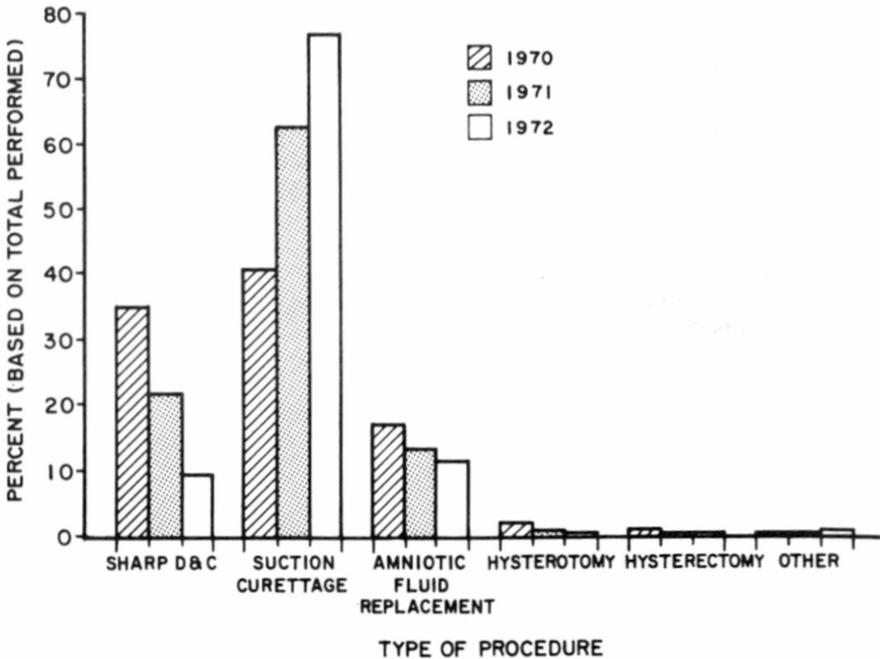
* ALL STATES WITH DATA AVAILABLE FOR 1970, 1971 AND 1972 :
ALASKA, COLORADO, DELAWARE, GEORGIA, HAWAII, NEW YORK,
OREGON, AND SOUTH CAROLINA

Fig. 4 ABORTION TO LIVE BIRTH RATIO, BY NUMBER OF PREVIOUS LIVE BIRTHS, SELECTED STATES,* 1972



* ALL STATES WITH DATA AVAILABLE (13 STATES)

Fig. 5 PERCENT DISTRIBUTION OF REPORTED LEGAL ABORTIONS, BY TYPE OF PROCEDURE, SELECTED STATES,* 1970-1972



* ALL STATES WITH DATA AVAILABLE FOR 1970, 1971 AND 1972: ALASKA, GEORGIA, MARYLAND, NEW YORK, OREGON AND SOUTH CAROLINA